

(When Filled In)

VOUCHER NO. 7-12		(When Filled In)		REQUEST FOR PAYMENT AND POSTING VOUCHER		VOUCHER NO. 7-12	
TO : Finance Division, Accounts Branch THROUGH: Monetary Branch		DIVISION VOUCHER NO. <div style="font-size: 1.2em; font-family: cursive;">16 April '62 3213</div>					
Request payment be made and/or transaction be recorded as indicated below. Pertinent documentation in support of this transaction is on file in this office.							
SUBJECT PAYMENT TO <i>Agard-Atomic, Inc.</i> AT <i>379332</i>				INVOICE NO(S). <i>6400-23 + 24, 6688-4</i> CONTRACT NO. <i>HF-CT-691</i> CHECK TO BE DATED			
CASH PAYMENT <input checked="" type="checkbox"/>		U.S. TREASURY CHECK		AGENT CASHIER CHECK		BANK CASHIER'S CHECK	
THE ATTACHED CHECKS AND/OR CASH IN THE AMOUNT OF \$ SHOULD BE TAKEN INTO ACCOUNT AS INDICATED BELOW.							
I HEREBY AUTHORIZE MY AGENT, WHOSE SIGNATURE APPEARS BELOW, TO RECEIVE \$				OF OFFICIAL FUNDS IN CURRENCY ON MY BEHALF.			
DATE SIGNATURE OF PAYEE		DATE SIGNATURE OF AGENT		DATE SIGNATURE OF RECIPIENT			
DESCRIPTION-ALL OTHER ACCOUNTS 13-33		34-39 STATION CODE		40-43 EXPEND CODE		44-46 F U N D S	
DESCRIPTION-ADVANCE ACCOUNTS 13-27		35-39 T/A NO. P.O. NO. PROJECT NO.		47-52 OBLIG. REF. NO. ADVANCE ACCT. NO. EMP. NO.		53-57 GENERAL LEDGER ACCT. NO.	
						58-67 ALLOT. OR COST ACCT. NO.	
						68-70 DUE DATE	
						71-80 AMOUNT	
						DEBIT CREDIT	
<i>Agard-Atomic</i> <i>" "</i> <i>" "</i> <i>" "</i> <i>" "</i>		 		 		 	
						OBJECT CLASS	
						DEBIT	
						CREDIT	
						TOTALS	
						DATE	
						AUTHORIZED CERTIFYING OFFICER	
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						AUTHORIZED CERTIFYING OFFICER	
						DATE	

**PUBLIC VOUCHER FOR PURCHASES AND
SERVICES OTHER THAN PERSONAL**

O. VOU. NO. _____

Use continuation sheet(s) if necessary

BU. VOU. NO. _____

Page 1 of 1
PAID BY

U. S. _____
(Department, bureau, or establishment)

Voucher prepared at _____
(Give place and date)

Payee's Account No. _____ Discount Terms _____

TO Baird-Atomic, Inc.
(Payee)

Cambridge 38, Massachusetts
(Address)

Contract No. HF-CT-691

Date

Req. No.

Date

Invoice Rec'd.

Shipped from

to

Weight

Govt. B/L No.

No. and Date of Order	Date of Delivery or Service	ARTICLES OR SERVICES (Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)	Quantity	UNIT PRICE		AMOUNT
				Cost	Per	
		<u>Inv. Nos.</u> 6400-23 6400-24 6688-4				\$ 885.62 237.70 2,670.00
TOTAL						\$3,793.32

PAYMENT:

COMPLETE ☐
PARTIAL ☐
FINAL ☐
PROGRESS ☐
ADVANCE ☐

(PAYEE MUST NOT USE THIS SPACE)

DIFFERENCES _____

Amount verified; correct for
(Signature or initials) _____

\$3,793.32

STAT

† Approved for _____ = \$ _____

By _____

Title _____

Exchange rate _____ = \$1.00

THE REVERSE OF THIS FORM MUST BE EXECUTED WHEN PURCHASES ARE MADE OR

ACCOUNTING CLASSIFICATION (Appropriation Symbol must be shown; other classification optional)

hat
ht.

16 APR
1962

(Date)

ating Officer)

STAT

Paid by { Check No. _____ on Treasurer of the United States
Check No. _____ on _____ (Name of Bank)
Cash, \$ _____, on _____, 19 _____ Payee _____

* When used in foreign countries, insert name of currency of country in which used.

† If the ability to certify and authority to approve are combined in one person, one signature only is necessary; otherwise the approving officer will sign on the line below "Approved for \$ _____", and over his official title.

Per _____

Title _____



33 University Road, Cambridge 38, Mass. 02142

TELEPHONE: UNIVERSITY 4-7420 - CABLE: BAIRD CO Cambridge, Massachusetts, U.S.A.

ANALYTICAL & CONTROL
INSTRUMENTS

TERMS: NET 30 DAYS

YOUR ORDER

YOUR ORDER

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WASHINGTON, D. C.

DPD 2512-62
COPY OF

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DATE ORDER RECEIVED		CUSTOMER'S PURCHASE ORDER NO. COMMON CUSTOMER		SCHEDULED SHIPPING DATE		SALESMAN 80		INVOICE NUMBER 92-6503/6400-23	
SHIP VIA EMERY AIR FREIGHT		F.O.B. POINT DEST.		DATE SHIPPED/INVOICE DATE 3/9/62 4/10/62		CARRIER'S RECEIPT NUMBER BOS 57574			
QUANTITY DUE	SHIPPED TODAY	MODEL/PART NUMBER	DESCRIPTION				UNIT PRICE	TOTAL	
			PRICED EXHIBIT NO. 9 -- PARTIAL BILLING AGAINST PACKING LIST #402:						
15	15		ITEM #1, AR44-11				35.30	529.50	
6	6		ITEM #5, AR44-22				52.78	316.68	
4	4		ITEM #11, AR44-396				9.86	39.44	
AMOUNT SUBMITTED FOR REIMBURSEMENT								885.62	
<p>We certify that the above bill is correct and just; that payment therefor has not been received.</p> <p>(BAIRD-ATOMIC, INC.)</p> <p>By </p>									

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